

Schedule 1A – Transfers in
(see Schedules 1 and 1B for other types of Income)

See instructions on reverse side

Name of Entity _____

Entity Number _____

			E	F	G	H
Date Received	Name and Address of the Campaign Finance Entity from which the transfer is received.		From MD Candidate Campaign Finance Entities	From MD Party Central Committees	From MD PACs	From Non-Federal Out of State PACs
		Aggregate to Date \$				
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TOTALS THIS PAGE			E	F	G	H

Failure to provide all the information required by this form will be regarded as a **FAILURE TO FILE.**
SBE-13-03 (Rev.4/03)